

## CENTRAL INTELLIGENCE AGENCY

Office of Legislative Liaison Washington, D. C. 20505 Telephone: 351-6121 11 February 1986

TO:

STAT

Mr. Bernard Raimo, Jr. Select Committee on Intelligence House of Representatives Washington, D.C. 20515

OCA 86-0388

Dear Bernie:

Per our telephone conversation today enclosed is the information we discussed.

Sincerely,

Office of Congressional Affairs

Enclosure

FORM 1533 OBSOLETE PREVIOUS EDITIONS.

Distribution:

Original - Addressee

1 - D/OCA

1 - DDL/OCA

1 - OCA Chrono

1 - OCA/LEG Subject: Retirement

1 - DMP/Signer

OCA/LEG: (pap) 11 February 1986

\*\*\*\*\* INPUT DATA LIST \*\*\*\*

NAME:

PUBLIC JOHN Q

RETIREMENT DATE:

860131

SALARY RATES

DATE RATE

85/01/31

37599

SURVIVOR BENEFIT ELECTED:

\*\*\*\* FULL \*\*\*\*

65-13

TOTAL SERVICE TIME:

25/00/00

UNUSED SICK LEAVE HOURS: 0000

AMOUNT OF UNPAID DEPOSIT:

\$00

COST OF LIVING ADJUSTMENT %: .000

\*\*\*\* ANNUITY DATA \*\*\*\*

HIGH 3 AVERAGE SALARY \$37,599.00 TOTAL ADJUSTED SERVICE TIME 25/00/00 BASIC ANNUAL ANNUITY \$18,799.50 BASIC MONTHLY ANNUITY \$ 1,566.62 ANNUAL ANNUITY REDUCED FOR SURVIVOR BENEFIT\*\*\*\*\*\*\*\*\*\*\* \$17,189.55 MONTHLY ANNUITY REDUCED FOR SURVIVOR BENEFIT\*\*\*\*\*\*\*\*\*\* \$ 1,432.46 ANNUAL SURVIVOR BENEFIT PAYMENT \$10,339.69 MONTHLY SURVIVOR BENEFIT PAYMENT \$ 861.64

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\*\*\*\*\* INPUT DATA LIST \*\*\*\*\*

NAME:

ATLAS CHARLES E

RETIREMENT DATE: 860131

SALARY RATES

DATE

RATE

85/01/31

72300

SURVIVOR BENEFIT ELECTED: \*\*\*\*\* FULL \*\*\*\*\*

TOTAL SERVICE TIME:

25/00/00

UNUSED SICK LEAVE HOURS: 0000

AMOUNT OF UNPAID DEPOSIT: \$00

COST OF LIVING ADJUSTMENT %: .000

\*\*\*\* ANNUITY DATA \*\*\*\*

HIGH 3 AVERAGE SALARY TOTAL ADJUSTED SERVICE TIME	\$72,300.00 25/00/00
BASIC MONTHLY ANNUITY	\$36,150.00 \$ 3,012.50
ANNUAL ANNUITY REDUCED FOR  SURVIVOR BENEFIT************************************	\$32,805.00

MONTHLY ANNUITY REDUCED FOR

SURVIVOR BENEFIT\*\*\*\*\*\*\*\*\*\*\* \$ 2,733.75 \$19,882.50 555-6

ANNUAL SURVIVOR BENEFIT PAYMENT \$ 1,656.87 MONTHLY SURVIVOR BENEFIT PAYMENT

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\*\*\*\*\* INPUT DATA LIST \*\*\*\*

NAME: NEUMAN ALFRED E

RETIREMENT DATE: 860131

SALARY RATES

DATE RATE 86/01/31 44430

SURVIVOR BENEFIT ELECTED: \*\*\*\*\* FULL \*\*\*\*\*

TOTAL SERVICE TIME: 25/00/00

UNUSED SICK LEAVE HOURS: 0000

AMOUNT OF UNPAID DEPOSIT: \$00

COST OF LIVING ADJUSTMENT %: .000

\*\*\*\* ANNUITY DATA \*\*\*\*

65-14 HIGH 3 AVERAGE SALARY \$44,430.00 TOTAL ADJUSTED SERVICE TIME 25/00/00 BASIC ANNUAL ANNUITY \$22,215.00 BASIC MONTHLY ANNUITY \$ 1,851.25 ANNUAL ANNUITY REDUCED FOR SURVIVOR BENEFIT\*\*\*\*\*\*\*\*\*\*\*\* \$20,263.50

MONTHLY ANNUITY REDUCED FOR

SURVIVOR BENEFIT\*\*\*\*\*\*\*\*\*\*\* \$ 1,688.62 ANNUAL SURVIVOR BENEFIT PAYMENT

\$12,218.25 MONTHLY SURVIVOR BENEFIT PAYMENT \$ 1,018.18

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